

Date: December 29, 1994

BQC 94-077

To: Nursing Homes
Facilities for the Developmentally Disabled
Hospitals
Home Health Agencies
Hospices
Ambulatory Surgical Centers
End Stage Renal Disease Centers
Rural Health Clinics
Occupational Therapy/Indep. Practice
Physical Therapy/Indep. Practice
Outpatient Rehab Agencies

NH	<u>54</u>
FDD	<u>38</u>
HOSP	<u>34</u>
HHA	<u>27</u>
HSPCE	<u>25</u>
ASC	<u>11</u>
ESRD	<u>7</u>
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OPRA	<u>7</u>

From: Judy Fryback, Director
Bureau of Quality Compliance

Subject: Cost Incurred During Survey

Recently, the issue of reimbursement to providers for costs incurred as a result of the survey process, including requests for copies of portions of medical records and telephone usage, has again been raised by several providers. The Bureau's policy is as follows:

Surveyors will not be requesting copies of records on a routine basis for the purpose of convenience (i.e., returning to the office to work on the survey). Copies will be requested for the purpose of preserving evidence as part of the survey process, or as required by the federal Health Care Financing Administration (i.e., HCFA-485 Form for Home Health Agencies). Additionally, surveyors who are in your facility or agency completing certification surveys for the medical assistance program require access to your facility phones for official business. Surveyors do possess Division of Health-issued telephone credit cards and are to use the credit cards whenever possible.

Copying costs and other incidental costs (i.e., telephone) are considered a normal part of doing business for providers who volunteer to participate in the Medical Assistance (M.A.) or Medicare (M.C.) Programs. Ordinarily, providers are reimbursed for these types of costs through the administrative daily rate (as outlined in HSS 106.01(9)(e)5. and HSS 108.24(4) for MA, for example).

However, a provider who is M.A. certified, and is at the maximum daily limit for administrative costs, would not receive any additional reimbursement through the M.A. program. Therefore, if the provider feels the photocopying costs are extraordinary (\$300.00 or more), they may seek additional reimbursement from the Department by sending a written request, including justification, for review by Bureau management. Similarly, if a provider is not M.A. or M.C. certified, and the amount of photocopying requested by Bureau staff is felt to be extraordinary by the facility, they may also send a written request with their justification to the Bureau for review.

Providers may send their request for reimbursement to Judy Fryback, Director, Bureau of Quality Compliance, P.O. Box 309, Madison, WI 53701. All written requests will be reviewed on a case-by-case basis. The Division of Health's approved rate of reimbursement for photocopying costs is .15 cents per page.

If you have any questions regarding this issue, please contact your Regional Office Field Operations Director.

JF/CA/pw

1516.nm

cc: -BQC Staff	-WI Counties Assn.	-WI Homecare Organization
-Office of Legal Counsel	-WI Health Info. Mgmt. Assn.	-Bureau of LTS, DCS
-Ann Haney, DOH Admin.	-WI Assn. of Homes & Serv/Aging	-WI Hospital Assn.
-Kevin Piper, BHCF Dir.	-St. Med. Society (Comm. Aging...)	-Hospice Organization of WI
-HCFA, Region V, M. Dykstra	-WI Health Care Association	-LTC BQC Memo Subscribers
-Illinois State Agency	-WI Assn. of Medical Directors	-Non-LTC BQC Memo Subscribers
-Ohio State Agency	-Admin., Division of Care and Treatment Facilities	-Secy, Dept. of Reg. & Licensing
-Michigan State Agency	-WI Assn. of Hospital SW and Discharge Planners	-Director, Bureau of Aging DCS
-Indiana State Agency	-Bd. on Aging & Long Term Care	-Mark Bunge, BPH
-Minnesota State Agency	-Bureau of Design Prof., DRL	-Renal Dialysis Network
-WI Coalition for Advocacy		-DD Board
-Serv. Employees Intn'l Union		-WI Surgery Ctr. Association